

Credit Counseling Application

- **Tips on how to manage your credit and increasing your credit score**

The San Antonio Housing Trust Foundation assists families to become economically and financially self-reliant. Through financial education, families will learn the necessary skills to develop their assets. This helps families invest in their future.

Families meet with a counselor on a one-on-one basis to resolve their credit issues. The counseling sessions teach and assist families to budget their expenses and initiate a savings plan to prepare for their future financial endeavors. Counselors conduct a free credit report analysis and tips on how to negotiate collection amounts.

Items to bring to appointment:

- Completed Applicant Intake Form
- Signed Authorization Form
- Proof of Income
- Social Security Card
- Driver's License

Counselors schedule vary. Please call (210) 735-2772 to make an appointment with a counselor.

Applicant Intake Form

Applicant Information:

Applicant name(s) _____ SSN: _____
Date of Birth _____
Property Address _____
City _____ State _____ Zip Code _____

Mailing address _____
City _____ State _____ Zip Code _____
Phone Numbers (home) _____ (office) _____
(Cell) _____ Other _____
E-mail _____
Number of people in household _____ How long? _____

No. of Children under 18 _____

Bankruptcy: _____ Yes _____ No _____ Chapter 7 _____ Chapter 13
Bankruptcy Attorney: _____

Employer's Name: _____
Employer's Address & Phone: _____
Title: _____
Type of Industry: _____
Start & End Date: _____
Hourly Wages: _____
Hours Per Week: _____
Gross Mortgagor Income: _____
Net Mortgagor Income: _____
Combined Income: _____

Median Income Less than 50% 50-80% 81-100% More than 100%

Co-Applicant Information:

Applicant name(s) _____ SSN: _____
Date of Birth _____

Mailing address _____
Phone Numbers (home) _____ (office) _____
(cell) _____ other _____
E-mail _____
Home phone: _____
Work phone: _____
Cell phone: _____

Employer's Name: _____
Employer's Address & Phone: _____
Title: _____
Type of Industry: _____
Start & End Date: _____
Hourly Wages: _____
Hours Per Week: _____
Gross Mortgagor Income: _____
Net Mortgagor Income: _____
Combined Income: _____

Mortgage Information:

Loan Number: _____
Servicer Loan Number: _____
Mortgage Company: _____
Current Servicer: _____
Original Lien Holder: _____
Payment prior to rate/escrow change: _____
Type: FHA _____ VA _____ Conv _____ ARM _____ Interest Rate: _____
Monthly Payment: _____ Months Delinquent: _____ Balance Owed: _____

Is the property for sale? _____ Listing date _____ Price \$ _____
Realtor name _____ Realtor phone _____
Borrower occupied. _____ Property Purchase Date: _____

Assets:

	Amount owed	Value
Home	\$ _____	\$ _____
Other Real Estate	\$ _____	\$ _____
Retirement Funds	\$ _____	\$ _____
Investments	\$ _____	\$ _____
Checking	\$ _____	\$ _____
Savings	\$ _____	\$ _____
Other	\$ _____	\$ _____

Automobile #1 Model _____ Year _____
Amount owed _____ Value _____
Automobile #2 Model _____ Year _____
Amount owed _____ Value _____

Monthly Income:

Applicant:

Wages _____
Unemployment _____
Child Support _____
Alimony _____
Disability Income _____
Rental Income _____
Retirement _____
Other _____
Other _____

Co-Applicant:

Wages _____
Unemployment _____
Child Support _____
Alimony _____
Disability Income _____
Rental Income _____
Retirement _____
Other _____
Other _____

Monthly Expenses: (Include expenses you are currently paying) **Total Expenses:** _____

<u>Expense</u>	<u>Amount</u>
1. Mortgage	_____
2. 2 nd Mortgage	_____
3. Automobile Payment(s)	_____
4. Auto Insurance	_____
5. Auto Fuel/repairs	_____
6. Credit Card Payments	_____
7. Installment loan Payments	_____
8. Child support / Alimony	_____
9. Day Care / Child Care / Tuition	_____
10. Food	_____
11. Utilities	_____
12. Condominium/ Neighborhood Fees	_____
13. Medical (not covered by insurance)	_____
14. Other property payments	_____
15. Telephone / Cell Phone	_____
16. Cable TV	_____

